

BEST AVAILABLE COPY

CLAIMS ONLY						SERIAL NO. 09/955397	FILING DATE								
						APPLICANT(S)									
CLAIMS															
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.									
1	/						51								
2	/						52	/							
3	/						53								
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50							100								
TOTAL IND.			5				TOTAL IND.								
TOTAL DEP.			44				TOTAL DEP.								
TOTAL CLAIMS			49				TOTAL CLAIMS								

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM TO-875)

100% INCREASE

Serial No.

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		↓		↓		↓
TOTAL DEP.	↔		↔		↔	
TOTAL CLAIMS	75	██████████	75	██████████	75	██████████

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		↓		↓		↓
TOTAL DEP.	↔		↔		↔	
TOTAL CLAIMS	75	██████████	75	██████████	75	██████████